

Revision: HCFA-PM-91-4 (BPD)  
August 1991

ATTACHMENT 2.6-A  
Page 24  
OMB No.: 0938-

State: Kentucky

Citation	Condition or Requirement
42 CFR 435.914	<p>11. Effective Date of Eligibility</p> <p>a. Groups Other Than Qualified Medicare Beneficiaries</p> <p>(1) For the prospective period.</p> <p>Coverage is available for the full month if the following individuals are eligible at any time during the month.</p> <p><input checked="" type="checkbox"/> Aged, blind, disabled. *</p> <p><input checked="" type="checkbox"/> AFDC-related. *</p> <p>Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.</p> <p><input type="checkbox"/> Aged, blind, disabled.</p> <p><input type="checkbox"/> AFDC-related.</p> <p>(2) For the retroactive period.</p> <p>Coverage is available for three months before the date of application if the following individuals would have been eligible had they applied:</p> <p><input type="checkbox"/> Aged, blind, disabled.</p> <p><input type="checkbox"/> AFDC-related.</p> <p>Coverage is available beginning the first day of the third month before the date of application if the following individuals would have been eligible at any time during that month, had they applied..</p> <p><input checked="" type="checkbox"/> Aged, blind, disabled. *</p> <p><input checked="" type="checkbox"/> AFDC-related. *</p> <p>*For medically needy spenddown cases, coverage begins on the day the spenddown liability is met.</p>

No. 92-1  
ersedes  
87-15  
o. 87-15

Approval Date NOV 14 1994 Effective Date 1-1-92

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Kentucky

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)	Condition or Requirement
1920(b)(1) of the Act	<p><u>    </u> (3) For a presumptive eligibility period for pregnant women only.</p> <p>Coverage is available for ambulatory prenatal care for the period that begins on the day a qualified provider determines that a woman meets any of the income eligibility levels specified in ATTACHMENT 2.6-A of this approved plan. If the woman files an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination of presumptive eligibility, the period ends on the day that the State agency makes the determination of eligibility based on that application. If the woman does not file an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination, the period ends on that last day.</p>
1902(e)(8) and 1905(a) of the Act	<p><u>  x  </u> b. For qualified Medicare beneficiaries defined in section 1905(p)(1) of the Act coverage is available beginning with the first day of the month after the month in which the individual is first determined to be a qualified Medicare beneficiary under section 1905(p)(1). The eligibility determination is valid for--</p> <p><u>    </u> x 12 months</p> <p><u>    </u> 6 months</p> <p><u>    </u> _____ months (no less than 6 months and no more than 12 months)</p>

TN No. 92-3  
Supersedes  
TN No. 92-1

Approval Date NOV 14 1994 Effective Date 4-1-92

State Kentucky

Citation

Condition or Requirement

1902(a)(18)  
and 1902(f) of  
the Act

12. Pre-OBRA 93 Transfer of Resources -  
Categorically and Medically Needy, Qualified Medicare  
Beneficiaries, and Qualified Disabled and Working  
Individuals

The agency complies with the provisions of section  
1917 of the Act with respect to the transfer of  
resources.

Disposal of resources at less than fair market value  
affects eligibility for certain services as detailed  
in Supplement 9 to Attachment 2.6-A.

1917(c)

13. Transfer of Assets - All eligibility groups

The agency complies with the provisions of section  
1917(c) of the Act, as enacted by OBRA 93, with regard  
to the transfer of assets.

Disposal of assets at less than fair market value  
affects eligibility for certain services as detailed  
in Supplement 9(a) to ATTACHMENT 2.6-A, except in  
instances where the agency determines that the  
transfer rules would work an undue hardship.

1917(d)

14. Treatment of Trusts - All eligibility groups

The agency complies with the provisions of section  
1917(d) of the Act, as amended by OBRA 93, with regard  
to trusts.

— The agency uses more restrictive methodologies  
under section 1902(f) of the Act, and applies  
those methodologies in dealing with trusts;

— The agency meets the requirements in section  
1917(d)(f)(B) of the Act for use of Miller  
trusts.

The agency does not count the funds in a trust in any  
instance where the agency determines that the transfer  
would work an undue hardship, as described in  
Supplement 10 to ATTACHMENT 2.6-A.

TN No. 95-6

Supersedes

TN No. 93-21

Approval Date 12/15/91

Effective Date 04/01/95

Citation	Condition or Requirement
1924 of the Act	<p>15. The agency complies with the provisions of §1924 with respect to income and resource eligibility and posteligibility determinations for individuals who are expected to be institutionalized for at least 30 consecutive days and who have a spouse living in the community.</p> <p>When applying the formula used to determine the amount of resources in initial eligibility determinations, the State standard for community spouses is:</p> <p><u>  X  </u> the maximum standard permitted by law;</p> <p><u>      </u> the minimum standard permitted by law; or</p> <p><u>  \$  </u> a standard that is an amount between the minimum and the maximum.</p>